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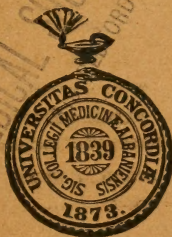
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ALBANY MEDICAL ANNALS

Journal of the Alumni Association of the
Albany Medical College

NOVEMBER, 1919

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ALBANY MEDICAL ANNALS

Journal of the Alumni Association of the Albany Medical College

EDITED BY

J. MONTGOMERY MOSHER, M. D.

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CONTENTS

November, 1919

ORIGINAL COMMUNICATIONS

- The County Medical Society, a Study.....By CHARLES H. MOORE, M. D. 353
Albany Hospital: Seventeenth Report of Pavilion F.....By J. MONTGOMERY MOSHER, M.D. 373

EDITORIAL

- Changes and Progress in Medical Education..... 383

PUBLIC HEALTH

- Department of Health, Albany, N. Y.: Abstract of Vital Statistics, September, 1919..... 387

MEDICAL NEWS

- The Medical Society of the County of Schenectady..... 391
Personal..... 392

IN MEMORIAM

- JOHN F. BEIERMEISTER, M.D 392

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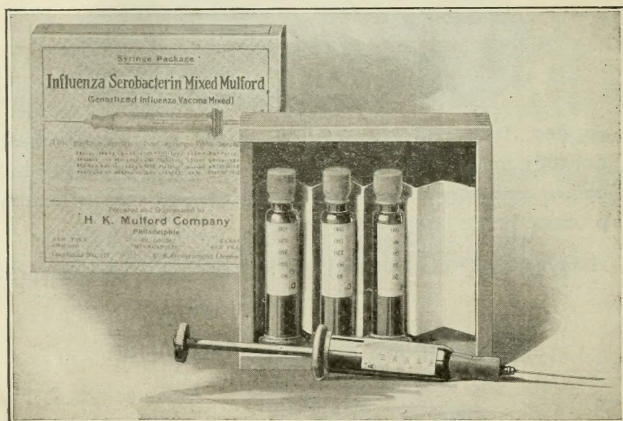
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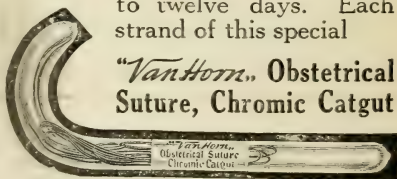
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ALBANY MEDICAL ANNALS

Original Communications

THE COUNTY MEDICAL SOCIETY, A STUDY.

*The President's Address to the Medical Society of the County of Albany,
May 13, 1919.*

By CHARLES H. MOORE, M. D.,

*Instructor in Ophthalmology and Otology, Albany Medical College; Assistant Attending
Ophthalmologist, Albany Hospital; Ophthalmic and Aural Surgeon, Child's Hospital.*

"An act to incorporate Medical Societies for the purpose of regulating the practice of physic and surgery in this state:" so reads the title.

Then follows the preamble: "*Whereas*, well regulated Medical Societies have been found to contribute to the diffusion of true science and particularly the knowledge of the healing art: *Therefore*, be it enacted, etc." So begins the bill to incorporate medical societies in the State of New York, that passed the Assembly March 28, 1806; the State Senate, April 2, 1806, and received the signature of Governor Morgan Lewis on April 4, 1806. Tuesday, July 1st, was the date set for organization but the requisite number, five, were not present on that day and adjournment was made until Tuesday, July 29, 1806, when ten physicians met at the City Hall in the City of Albany and conformably to the act to incorporate medical societies, convened and proceeded to form themselves into such a society.

Five were from the City of Albany, two from the town of Bethlehem, and three from the City of Schenectady, at that time and until 1909 in Albany County. It will be interesting to note briefly the characteristics of these ten pioneers in a new venture. The chairman of the meeting, Wilhelmus Mancius, was nearly seventy years of age. Somewhat eccentric, but of a social, genial

nature, he had by careful observation obtained considerable skill and stood an oracle not to be disputed on medical topics. His associate in practice Hunloke Woodruff, some seventeen years younger, was chosen president of the infant society. He was a graduate of Princeton College, had studied medicine in New York City and had served with honor as surgeon in the Revolutionary Army under Colonel Peter Gansevoort of Albany. The one elected as vice-president, William McClelland, was still younger and with a medical education received in Edinburgh, Scotland, had many advantages over his associates, and it is not surprising that he was elected representative to the meeting to form the New York State Medical Society and enjoyed the high honor of becoming its first president in February, 1807.

The Secretary, Charles DeKay Townsend, had attended medical lectures at Columbia College, was a young man twenty-eight years of age and for many years thereafter exemplified in his life the highest that there is in the practice of medicine, rendering alike service to the poor and the rich.

John G. Knauff was elected treasurer; he was born in Germany, of sound education, an apothecary as well as physician, but being of a retiring and unsocial disposition, he made few friends.

Joseph W. Hegeman is spoken of as being the son of wealthy parents, licensed to practice by Princeton College, was from Schenectady, where he was esteemed a good practitioner, gentlemanly and courteous in manner. Cornelius Vrooman, likewise from Schenectady, twenty-five years old, six feet in height, quick tempered but popular, kind hearted and generous, was educated at Union College and had attended medical lectures at the University of Pennsylvania. From a country village in the town of Bethlehem, south of Albany, came Caleb Gauff, a typical family physician, past the meridian of life, of whom little is known, save that he was a respectable practitioner.

Augustus Harris, some thirty years of age, followed in the footsteps of his father as physician among country folk for many years, lived to see the society he helped form pass the half century mark. And the youngest amongst those who gathered on that July day was Alexander Glen Fonda, a graduate of Union College, who had studied medicine under the direction of one of

Schenectady's foremost physicians, his license to practice but two months old and lacking three weeks of attaining his majority, lived to be present at the Semi-Centennial meeting of this society.

Rarely has any organization been formed that better expressed in the character and aspirations of its charter members what it stood for than did the society of which you and I have the honor to be members. It is not my purpose to give a strictly historical review of the events that have marked the progress of the Medical Society of the County of Albany since its inception one hundred and thirteen years ago, but to touch here and there upon some points in its life history that tell of its advance toward the realization of an ideal. It is not my purpose to weary you with many statistics, nor is it my intention to speak at much length of those, who either in positions of prominence, or in the rank and file, worked for the honor and welfare of this Society. Dates will have to be given, in order that one appreciate more fully the conditions that surrounded the events I will briefly speak of. It is an interesting study, the life of an organization, and one of the first things we note is the fact that many of the troubles with which we contend at this day are of the same nature as the troubles that confronted those of a century and more ago.

We speak of one generation following another and our minds conceive of a generation as comprising thirty years, so let us study our subject in terms of that nature. Our first generation therefore begins with 1806 and ends with 1836. It was a period of growth, of adaptation to formal rules and by-laws, of putting into action unaccustomed efforts. What was the first purpose of the Society? It was to differentiate between the charlatan and the qualified physician, to raise the standard of medicine by the power given it by law to examine and license those who desired to practice medicine. Jealous indeed was our Society of any infringement upon this privilege and duty.

Four stated meetings were to be held each year and a Medical Dissertation was to be handed in at every quarterly meeting by one of the members, chosen in alphabetical order. There was an admission fee of three dollars when elected, and a stated fee of fifty cents to be paid at each quarterly meeting. This last, with the fees paid by candidates for examination, which was the

sum of two dollars, went to the funds of the Society to be used for the establishment of a medical and philosophical library and apparatus.

Hardly two years had passed before we notice that the treasurer began to have trouble in collecting the quarterly payments and an article was added to the by-laws that allowed him to prosecute annually for the same. At this time we also find our Society alive to the truth that something more is needed to bring men together than infrequent meetings mostly given over to business, and in addition to the four stated meetings required by law, a meeting was to be held every intervening month for the purpose of promoting social intercourse and harmony, which all respectable physicians in the county were requested to attend.

We find an interesting little item in the records of these early days that shows that paying for books on the instalment plan was not unknown, for in 1810 the Society agreed to purchase a set of books, "Medical and Physical Journal," in twenty-one octavo volumes, valued at one hundred and five dollars. Of course there was an extra assessment on each member to meet this obligation. Hardly eighteen months elapsed when an obliging member paid the balance due, took the set off their hands and stopped this drain on the slender resources of the Society.

Filled with a growing sense of its powers and importance the County Society in the fall of 1813 decided that the State Medical Society was in its opinion injurious to the promotion of medical knowledge and practically asked for its abolition. A change of heart soon came, for within three months a delegate was elected to the Medical Society of the State of New York, but there had been a feeling of unrest and bitterness engendered, for all the stated meetings were passed for the next two years, no quorum appearing at any of them.

Changes were made from time to time during this decade in the laws relating to the practice of medicine. Time will not permit my stating the nature of these changes, suffice it to say that then as now, our Society through its committees kept close watch upon all pending legislation. Having its location in the Capital City of the State it had many opportunities to be of service in that respect. Slandrous remarks from foes, sometimes called

forth the retort courteous, as did an article appearing in the *New York Evening Post*, in which was this sentence, "In one County Medical Society it was seriously debated whether the money thus raised by the dollar tax should not be appropriated to the purchase of liquor." It was generally understood that the Society at Albany was referred to and at a special meeting held March 18, 1822, were passed resolutions characterizing the statement as "false and malicious, totally destitute of the shadow of truth, and disgraceful to the authors and the propagators of it."

In 1824 an epidemic of small pox occurred in our city and a communication was received from the mayor asking advice. This Society thereupon passed a resolution expressing full confidence in vaccination and recommending it as the only reasonable measure of checking the disease.

In 1826 a patented device for the application of warmth and moisture externally, known as the Albany Medicated Vapor Bath came into existence. The Society looked upon it as a species of quackery and contrary to the code of medical ethics of the State Society, and through a committee carefully considered the subject and decided that Dr. Jonathan Eights, William Bay, and John W. Bay, who had become interested in and were making use of this vapor bath, were not acting in accord with medical ethics in their judgment, but referred the matter to the State Society for their consideration and final decision. I find no further reference to the subject in either county or state record.

In 1827 the law of the State read that one to be legally entitled to practice medicine must not only be licensed but be a member of a County Medical Society as well. Many interesting papers no doubt were read in the twenty years that had passed since organization, but except a few transmitted to the State Society or published in some contemporaneous medical journal, these are lost to us, for the minutes of the meetings report they were deposited in the archives—that mausoleum from which nothing returns.

January 11, 1831, was a strenuous day. It was the annual meeting. Dr. Charles D. Townsend had been re-elected President and Dr. Barent P. Staats, Vice President. The attendance was large, confusion prevailed, a dissatisfied minority after the

regular meeting elected a separate set of officers; the ex-Secretary and Librarian retained the records, papers and library of the Society and refused to deliver up the same. Competent legal advice was sought in the person of Benjamin F. Butler, Esq., one of the most prominent lawyers of Albany at that time, associated in practice with Martin Van Buren, and after an opinion had been obtained from Chief Justice Savage, the records and books were returned. More important matters were soon to engage the attention of our members. Cholera gained a foothold in our State and again came an appeal from the city authorities to the physicians. Immediately a medical staff, under leadership of Dr. Eights, Chairman, was created, the other members being Drs. Wing, Greene, Bay, Townsend, Wendell, James, McNaughton, and March. All members of the Society, however, worked faithfully to stamp out this plague, during those days and weeks of anxiety when 422 deaths occurred among 1,147 cases of Asiatic Cholera that were reported. Possibly this experience was responsible for the passing of this resolution at the anniversary meeting of January, 1833: "It is the sense of the Society that the time had arrived when a public health officer is required in this city, and that the Society recommend the subject to the attention of the city authorities." The meetings at this time were well attended, the Society was doing good work, proceeding as best it could against illegal practitioners, carrying the matter into the courts and obtaining gratifying results. Most of the meetings were held in the City Hall in 1831; prior to that time they had been held in the State Capitol and, in the very early days of its existence, in the old City Hall. At many of the meetings the roll was called and the names of the absentees as well as those present were recorded. Those absent were fined, but this method of securing attendance was unpopular and on more than one occasion it was necessary to remit fines to avoid unpleasantness. As the end of the first generation approaches there is a slump in interest and several meetings pass in succession, no quorum being present.

The study of our second generation, that from 1836 to 1866, is an interesting one, and although for a time interest seemed lost, a faithful few proved loyal and soon results followed. So

far in the history of the Society, members were notified of regular meetings by publication in newspapers, but in 1840 personal printed notices were directed to be sent. Even then attendance was small at the annual and semi-annual meetings, the only two meetings that the Revised By-laws (adopted in January, 1840) required: an annual meeting in November, a semi-annual in June. Five members constituted a quorum, except at the annual meeting, when nine were required. Since 1838 it had been customary for the President to read an address at the annual meeting, but on November 9, 1841, when Dr. Jonathan Eights called the annual meeting together, at 12 o'clock noon, an hour after the appointed time, only five members were present. An adjournment to meet a week later brought six together, the paper was read and discussed and adjournment for another week, when nine being present, officers for the ensuing year were elected. A resolution adopted at that meeting called upon practitioners in Albany County to unite with the County Society within thirty days or their names would be published with the list of illegal practitioners. At the next annual meeting, called for November 8, 1842, the Secretary reports:

"Visited the City Hall for the purpose of meeting the Albany County Medical Society and found no one in attendance except the President, Dr. Peter Van Buren. H. Greene, Secretary."

No meeting was held till November 13, 1843. At this meeting a motion was adopted that a list of all the members should be published in the Albany City newspapers stating that the said members were the only persons who had the power to collect by law a compensation for medical services. This seems to have been the law since 1806 although those who only used barks, roots and herbs grown in the United States were exempt from its provisions.

Radical changes were to be made in the medical laws, for all restrictions were to be removed from the right of any one to collect for medical services rendered, although liable to civil and criminal prosecutions, for mal-practice, gross ignorance or immoral conduct.

While not approving of all the provisions of this act of May 6, 1844, and objecting to the last, the Society chose to abide by the

report of its committee, Dr. Thomas Hun, Chairman; Dr. Joel A. Wing and Dr. Mason F. Cogswell. The report from which I will quote later was accepted and the following resolution adopted: "*Resolved*, That in the opinion of the Society it would not be conducive to the interest or respectability of the medical profession, at the present time, to apply to the legislature for any alterations in the charters of the State or County Medical Societies, or any legislation on medical subjects whatever."

Some sentences of that committee's report are worth repeating now. I ask your serious consideration of them: "The dignity and respectability of our profession is to be promoted, not by asking for legal privileges but by an increase of individual zeal and a more cordial cooperation. The barrier which effectually separates the physician from the quack is formed by the higher attainments and honorable deportment of the former and this is the barrier which it depends on us to make higher and stronger. It is one which quackery will not surmount and which no legislative enactment can break down." Dr. Thomas Hun was chosen President at the next annual meeting and during his administration every effort was put forth to revive interest, old members who had lapsed were urged to return to the fold and new members were sought for, circular letters being sent to all regularly licensed physicians in the country. In spite of all this effort in February, 1846, a pessimistic feeling prevailed. In the minds of some the County Society had failed of its high mission, distrust and lack of good feeling had grown up, members had remained isolated and scarcely knew each other. What must be done? Does not this Jeremiad sound familiar? Though often discouraged the faithful few struggled on. The attendance might be small but they were representatives of the best in the profession as were the ten who had met to form the Society. Several problems were met with and considered, among them: how to protect the physician from the imposition of the non-paying patient; a better and reciprocal understanding between the physician and the apothecary, and the presentation of a memorial to the common council looking to the establishment of a medical dispensary. The last was at a meeting held January 5, 1847, and the committee appointed to present this memorial consisted of

Drs. Thomas Hun, Joel A. Wing and Alden March. The last named had been an active member of the Society since January 14, 1823, and through his efforts and by his energy the Albany Medical College had been in existence since January, 1839. With such a committee it was not long before the Albany City Hospital became a reality and in 1849 it opened its doors for the relief of suffering humanity.

It had been the custom thus far to hold the stated meetings in the morning, but it was thought wise to change the hour to three in the afternoon. Once more the question of a reading room was revived and more earnest care was bespoken for the library. A public spirited citizen engaged in business as a bookseller, Mr. E. H. Pease, offered a room for such purpose. His offer was accepted and for two or three years in the early fifties much use was made of his hospitality. March 23, 1853, we note a new departure from the customary order of things. A uniform fee list seemed desirable in the opinion of our members, although such an innovation had been formerly looked upon with disfavor by both State and County Societies. A committee of three, consisting of Drs. Barent P. Staats, S. Oakley Vander Poel and J. B. Rossman, were appointed such committee and in June reported a fee list to apply only to the City of Albany. The prices ranged from twenty-five cents for "every powder or dose of pills" to fifty dollars for some cases of "instrumental labor" or for cases of "lues venerea" but if any individual practitioners considered their services not equal to the prices specified they could charge a less sum for their compensation.

It was the custom about this time to invite students of the Medical College and often the regular order of business was changed in order that the medical class might listen to an address and not be detained beyond the hour of the next class meeting. In December, 1853, three delegates were elected to the State Medical Society, according to Act of Legislature of June 4, 1853, instead of the one delegate formerly allowed. Times were changing, many physicians were possessors of medical libraries as well as subscribers to periodicals of that nature and in November, 1855, this resolution was passed: "That the Society present the Library and all its appurtenances to the Albany Medical College."

Six months later the College, through its Registrar, acknowledged the gift.

On December 9, 1856, the Society, realizing that while under the law its members could be called upon to give testimony in criminal cases, to make post-mortems and to examine where insanity was suspected, still the remuneration was ridiculously out of proportion to the services rendered, presented a fee bill, which the State Medical Society recommended as a model for other County Societies to follow.

A month prior to this date, the Society's Semi-Centennial Anniversary was held on the eleventh day of November, on the date fixed for the annual meeting. The business meeting was held in the Common Council Chamber in the City Hall while the banquet took place in the evening at Congress Hall. The Semi-Centennial address was delivered by Dr. Sylvester D. Willard, at that time Secretary of the Society, and I would recommend you all to read his resumé of the fifty years that had passed. At the next annual meeting evidences of a closer participation in civic affairs is noted by the adoption of a resolution, offered by Dr. J. H. Armsby, recommending the enactment of a law regarding uniform registration of birth, marriages and deaths as being of the highest importance not only to the medical profession but to the interests of society generally.

The next year an epidemic of diphtheria prevailed throughout the county and its discussion occupied the minds and tinged the expressions of those who participated in the work of the meetings. Smoothly matters moved along, the attendance was excellent and harmony prevailed, when once more discord arose. An election had been held, a delegate to the State Medical Society had been elected and it was alleged in the public prints and otherwise, that the number of ballots cast and counted was greater than the whole number of members present and voting. Such aspersions upon the honor and dignity of our Society called for prompt action. The committee appointed to investigate, consisting of Drs. Thomas Hun, Cogswell and Quackenbush, could not trace the fraud to any person or persons, but stated that the so-called spurious ballots would not have changed the result. A resolution was adopted at the semi-annual meeting of 1859, which suggested

that greater interest would result if committees were appointed for the investigation and special consideration of medical subjects, reporting at each regular meeting of the Society. At the annual meeting that year, the President, Dr. S. D. Willard, appointed eighteen such committees, consisting of from one to three members each. I will only mention a few of them. "Management of the Albany County Asylum for the Insane;" "Comparative Value of Medical Anaesthetic Agents and Mode of Death from their Uses;" "The Use of the Silver Suture;" "To Secure Mortuary Statistics in the City of Albany;" "Public Hygiene;" "Surgery" and "Medical Journalism."

An effort was made to have meetings again at monthly intervals and though the attendance was not large, except at the annual or semi-annual meeting, much of interest and encouragement is found in the records of the next two years. At the annual meeting in November, 1860, a resolution was passed that hereafter the Society would not admit any physician as a member who dealt in patent or quack medicines. I have wondered whether the introducer of this resolution was antagonistic to two physicians, both respectable druggists who had very recently joined the Society.

In February, 1862, we meet a resolution that sounds familiar, in part as follows: "A committee of three to be appointed to take measures and attend to the procuring of suitable refreshments, to be furnished to the Society at their monthly meetings." The civil war was now in progress and its effect is shown in the character of the papers read and the discussions that followed. It is interesting to note that by those who were appointed for the examinations of persons claiming exemption from military duty under the draft law, hernia was found to be the cause in ten per cent of those examined. Discussion was frequently had relative to the care of the sick and wounded in our army and navy and many of our members did yeoman service in correcting abuse and alleviating distress. Time and space will not permit the mention of the names of those who went to the front from our membership in those days of peril to our nation. Two names come to my mind of those who won honor and distinction in those early days of the war: Dr. Sylvester D. Willard and Dr.

John Swinburne, the latter also achieving fame for his surgical work in the Franco-German war years later.

In October, 1864, the Society met to greet Dr. Wm. T. G. Morton, who gave an account of his discovery and early experiments with ether. Public meetings were held and a substantial sum of money was raised for the Morton Fund that had been established for the purpose of expressing the appreciation of his fellow countrymen for the boon he had conferred upon humanity in proving the value of ether as an anaesthetic agent. At the annual meeting that year reports were called for from the eighteen special committees for medical investigations appointed in 1859; only three had any report whatever to make. Vacancies were filled and the committees continued. The propriety of practitioners advertising their specialties was also discussed at this meeting. It was decided that an advertisement indicating locality and residence was the utmost limit of self-announcement consistent with professional dignity; all references to special branches should be deemed violations of the Code of Medical Ethics. However in our County Medical Society, specialties seemed to be recognized, for at the semi-annual meeting, held in June, 1865, among the special committees appointed was one on Diseases of the Eye and Ear, Dr. Charles A. Robertson, Chairman; and in December of that year, cases of Ear Diseases were reported and a few months later a paper entitled "The Present State of Ophthalmology," was read.

My father, Dr. Levi Moore, was elected President of the Society at the annual meeting held on November 14, 1865, and it was during his administration that two of our members, still active among us, were admitted. On November 14, 1865, Dr. Joseph Lewi proposed the name of Dr. Herman Bendell and on June 12, 1866, Dr. William H. Bailey proposed the name of Dr. Albert Vander Veer. Both of these names were voted upon at the annual meeting, held November 13, 1866, and they became members on that date. They have the honor of having faithfully served the Society for the longest period of time of any member now living.

A question was raised in one of the meetings held in 1866, "Whether a physician who kept a drug store, and sold patent

medicines, could, according to the rules, be admitted to membership in the County Society." Remarks were made, and no action was taken. Several of our members at that time were druggists as well as physicians.

Another fee list was submitted in June, 1866, by Dr. Alden March, Chairman of the committee, and the increase in fees above that of the list of 1853 showed the effect of the high cost of living owing to post-war conditions. It closes however with this sentence: "In every case, in settling this account, the practitioner may make any deduction which he conscientiously believes the circumstances of the patient render necessary." The President's address in November, 1866, was "Sanitary Science and Its Relations to Public Health," an appropriate subject at that time, for our country had again been threatened with an invasion of cholera which twice before, in 1832 and again in 1834, had been epidemic in Albany. This time we escaped.

Our next generation, from 1866 to 1896, shows continued growth in usefulness and power and our study of its efforts reveals the effect of the greater diffusion of medical knowledge, of discoveries made, and of an awakened public interest in matters pertaining to public health. On June 20, 1867, the Albany County Medical Society gave a dinner at the Delavan House to Drs. James Wade, Barent P. Staats and James McNaughton, who had each completed a half century in the practice of medicine. At that dinner, in responding to the toast, "The Albany County Medical Society," Dr. S. O. Vander Poel spoke these words to which I invite your attention: "There is a point in which the principle of associations is peculiarly applicable to the medical man. His professional life is one of isolation, while in the world moving among men, he is still not of the world so far as ordinary business transactions and relations are concerned. Unlike the legal profession he is seldom thrown into direct personal relation with his professional compeers. He has therefore but little opportunity except through his Society of estimating them correctly either as men or physicians."

Albany at this time had a population of some 70,000, ten times the number of inhabitants that it possessed in 1806 when the Society was founded. September 22, 1868, showed a close rela-

tion between the Medical Society and the Albany Hospital, when by invitation of the Board of Governors of that institution, then situated at the corner of Eagle and Howard streets, the Society met in a room fitted up especially for them. For two years, twice each month, from September first to June first, meetings were held at eight o'clock in the evening and it was customary to have a recess during which refreshments were served.

The meeting, apart from such business as it was necessary to transact, was devoted to the discussion of live medical topics and the presentation of cases and interesting anatomical specimens. The Secretary during that period, Dr. Charles H. Porter, was a master of detail and has given us in his minutes a realistic pen picture of those meetings, making them seem real and life-like to us even now.

In April, 1869, action was taken looking toward the better care of the insane poor, particularly those confined in the county poor houses. This subject had been brought to the attention of the Society in 1864 and again in 1867, but like many other reform measures, action was slow. It was in December, 1869, that a semi-scientific committee was appointed to investigate and report upon the origin of the Cardiff Giant, then on exhibition in the basement of Geological Hall. It is not recorded that they made any report, but there is no doubt that this presumably petrification of a primeval man was in the minds of the members of the committee a stupendous hoax, as later events showed it to be.

The meeting of January 10, 1870, was chiefly occupied with the consideration of a subject that is as old as the Society itself and as far from settlement at the present day as then. Time will not permit me to state the question. Suffice it to say, it was this: How far may the physician, a member of the County Medical Society go, by the means of the public press, to bring himself before the public without offending good taste or the rules of professional conduct; otherwise known as medical ethics. Some of our members had in the judgment of others grievously erred in this respect. The committee to whom the matter was referred investigated it carefully. Dr. Charles H. Porter, who was chairman of that committee as well as secretary of the Society, has given us a very complete report of the matter. A

report was rendered carrying with it a vote of censure. This was adopted by a vote of twenty-three against, eighteen voting otherwise.

In 1871 the Society again met in the City Hall, the attendance was good and the meetings were of the same character as those held at the Albany Hospital. An epidemic of cerebro-spinal meningitis occurring during the spring of that year occupied the attention of the Society for several sessions. During the next two years we find little on which to comment except that the reports of the papers read and the cases presented showed a gradual change in medical thought and methods.

In the month of May, 1873, our City Fathers came to the Society, propounding this important question, "Whether the water of the Hudson River was sufficiently pure and wholesome for a City Water Supply."

Dr. Albert Vander Veer was president of the Society at that time and after an interesting discussion in which the following took part: Drs. C. Devol, Levi Moore, W. G. Tucker, S. H. Freeman, R. H. Sabin, William Hailes, T. D. Crothers, James S. Bailey, William H. Bailey, W. H. Craig and Mr. Gustave Michaelis, my father, Dr. Levi Moore offered the following resolutions which I take the liberty of presenting in full:

"Whereas, The Common Council of the City of Albany has consulted this Society as to the admissibility of the water of the Hudson river for general use; therefore be it

"Resolved, That the Medical Society of the County of Albany do hereby acknowledge the courtesy of the Common Council of the City of Albany in recognizing the physicians of the city as the proper curators of the public health, and in consulting them in regard to the water supply;

"Resolved, That in the judgment of this Society the sanitary condition of the city would be impaired by the use of river water taken from a point near the city, and that typhoid, choleraic and other diseases might be disseminated thereby, inasmuch as the water cannot be freed from the contamination of sewage and factory waste, even by filtration according to any process yet known;

"Resolved, That this Society remonstrate against the use of the Hudson river waste for culinary and domestic purposes;

"Resolved, That the Secretary of this Society be instructed to transmit copies of these resolutions to his honor the Mayor of the city of Albany, and to the Clerk of the Common Council."

The first of these resolutions was adopted; the rest laid on the table until the semi-annual meeting a month later. At that meeting the President announced that further discussion of the water question was uncalled for, as the Common Council had decided the matter by voting to use it.

At the June meeting in 1875 the Board of Censors reported that no candidates had applied to the Board to be examined for license to practice medicine and surgery. This would seem to indicate that they still possessed that power although in 1872 the Board of Regents of the State of New York were given the licensing power through a board of examiners.

On January 5, 1876, a most timely paper was read by Dr. Frederic C. Curtis on "Certain Points Connected with Typhoid Fever," which had showed an increase in number of cases and in deaths during the preceding fall. He propounded this question, "How much has the use of our river water to do with it?" He showed this increase to be coincident with the pumping of river water into certain of the water mains of the city. It was during this year that one of our members offered a series of resolutions which showed that some desired to break away from many of the recognized rules of medical ethics. Fortunately for the welfare of the Society they were not adopted. The time was not yet ripe when such liberal views regarding the medical profession could be put in practice even in part and some would not be tolerated even at the present time.

In 1877 the old Committee on Hygiene appointed in 1873 was revived and the first report it presented was on School Hygiene, a subject that became in later years of paramount importance. During the next year, 1878, the following standing committees were appointed: On Registration, Pathology, and on Hygiene and the Relation of the Medical Profession to the Public, showing a desire for closer relation with matters outside the Society itself.

At the annual meeting, held October 14, 1879, eighty-five members were present. The President, Dr. F. C. Curtis, in his address, made a strong plea for one uniform, impartial standard for admission to the practice of medicine, the standards high and uniform and license to practise be conferred only by the University of the State of New York constituted by the Board of Regents. In 1880 the Society lost the power of licensing physicians that had been one of its cherished privileges since its organization in 1806.

On January 28, 1880, in the County Court room of the City Hall was held the last meeting in that building for on February 10th of that year the City Hall was destroyed by fire and the next regular meeting of the Society was held at the Albany Medical College in Alumni Hall which proved to be our regular place of meeting for many years.

While many believed in the old order of things there were others who believed in more freedom of action and at the annual meeting held October 10, 1882, the new Code of Ethics, adopted by the State Medical Society at its previous meeting was, on motion of Dr. S. B. Ward adopted by our Society without dissent.

The matter of school hygiene interested some in 1884 but apparently no concerted action was taken at that time, the Society as on other occasions in the past simply marking time. Meetings were regularly held, but, save at the annual and semi-annual meetings, the attendance was not large. Dr. Franklin Townsend, who was president in 1887, voiced one of our needs in order to secure results when in his annual address he said: "Much that could be done to enhance the interest and strength of our institutions can only be realized by strong cooperative methods."

During the years 1889 and 1890 typhoid fever and la grippe were subjects discussed on many occasions and the papers read were well written and of interest to all. Intubation of the larynx and serum therapy, especially in the treatment of diphtheria, also were matters considered during these last years of the third period in which I have divided my study of the Society.

Our last generation, from 1896 to the present time, was an important one. Great changes were taking place, higher stand-

ards in medical education were required and it is not surprising that the Medical Society of the County of Albany felt the influence of the times. The erection of the Bender Laboratory and the steps taken looking toward the erection of a new Albany Hospital appealed alike to civic pride and to greater interest in things medical. The discovery of the Roentgen ray and further advances in serum therapy gave opportunity to our members for many original papers of much interest.

Important was the meeting held on March 24, 1897, for it had much to do with the future welfare and healthfulness of Albany. I cannot refrain from dwelling for some length upon it. Four papers were read and discussed. They were as follows: "The Quarantine Isolation and Care of Contagious Diseases," by Dr. Lewis Balch. This paper ended with a plea for the establishment of a contagious disease hospital for those ill with other contagious diseases than small pox. This recommendation we find now exemplified in concrete form in Pavilion G of the Albany Hospital.

The second paper, "An Outline of a Plan of the Sewerage and Water Supply of the City of Albany," by Dr. L. H. Neuman; and the third paper, "Engineering Problems Involved," by Albert J. Hines, C. E., foreshadowed the building of the intercepting sewer and purification plant which has but recently become an accomplished fact. The last paper was, "The Board of Health in Relation to the Water Question," by Dr. F. C. Curtis. The writer of this last paper had in 1876 discussed the influence of our water supply upon the occurrence of typhoid fever. He urged now the purification of the water by the slow sand filtration system. After discussion the following committee of the Society was appointed to represent our Society before the Common Council in relation to the filter of the Hudson River water, namely, Drs. A. Vander Veer, O. D. Ball, Henry Hun, S. B. Ward and H. Bendell. The committee was also instructed to recommend the slow sand filtration system suggested by Allen Hazen, Consulting Engineer. That the voice of the Society carried conviction and that the work of the committees was faithfully done we who now reap the benefits from their efforts bear witness. Except at special meeting the attendance was small and

in 1901 we listened to another Jeremiad similar in character to that which each preceding generation had heard. But in spite of the pessimistic tone of the president that year, Dr. A. MacFarlane, in his annual address—important suggestions worthy of trial may be noted: Among them we find these words: "The function of the Society is lost sight of;" "It should consider the trades union spirit;" "Its purpose is not alone that of reading scientific papers and exploiting personal interests; its principal object should be chiefly caring for medical affairs affecting self and the community." A closer bond between ourselves and community was shown in the following year when the Chamber of Commerce came to us asking for a certificate testifying to the healthfulness of the city. The year 1903 saw the formation of the Milk Committee or Commission, the usefulness of which no one can deny, and we also showed our interest in progressive ideas by favoring the unification of our educational system throughout the State. In 1904, Dr. S. B. Ward voiced the experience of many of our members when he reported the rapid lessening of typhoid cases due to the system of water purification adopted seven years before. This year also saw the beginning of the State Medical Library and the dreams of the founders of the Society became realities in the impetus this gave to research and information along medical lines. The more intelligent care of those in our county afflicted with tuberculosis occupied in part the minds of our members in 1905. The year 1906 saw the amalgamation of the two State Societies and the closer union of the County Societies with the State Society. All members of our County Society were now in virtue of such membership, members also of the Medical Society of the State of New York.

On May 8, 1906, Dr. George G. Lempe was chosen president, to be reelected for another term a year later. A feature of his administration was the number of prominent physicians from other cities and even from abroad, who read papers before the Society and participated in its medical discussions. Many papers of scientific interest and in accord with the trend of medical thought at that time were presented also by our members. Among those who were present with us from elsewhere I might mention, Dr. Abraham Jacobi, and Dr. Ramon Guiteras of New York;

Dr. H. L. Elsner of Syracuse, N. Y., Dr. Joseph Price of Philadelphia, Dr. J. E. Goldthwait of Boston, and from abroad Prof. Fredrich Müller of Munich. In April of 1907 we went on record as favoring medical school inspection and in October of the same year a volunteer corps of physicians instituted such work among the children attending our public schools. It is needless to enlarge upon the work of the last ten years; most of us can bring to mind many of the events that have made this period of time an important one in every sense of the term and we know our Society did not fail in meeting the issues as they arose from time to time.

War clouds began to overshadow the earth and many new problems were presented. It is a source of gratification to realize that the Albany County Medical Society was the first of the State County Societies to take any active interest in a preparedness program and when in 1917 we became involved no inconsiderable number volunteered their services. The same spirit was manifested in 1898 in the Spanish-American War. Many of our number served in the military service abroad, others in encampments throughout the country, while others in their medical capacity served as civilians on Local Draft or on Medical Advisory Boards. In spite of all this, attention was paid to matters relating to the welfare of our Society and of the profession at large. The Compulsory Health Insurance Bill first brought to our attention in 1916 has been actively fought and thus far with success.

Our legislative Committees have at all times been active and our Society has been indeed fortunate for many years in having had men qualified and ever energetic to care for this important part of its activities. Among those who have served as chairman in the past I might mention the names of Dr. Arthur G. Root and Dr. James F. Rooney. The retiring president in 1911, Dr. John H. Gutman, spoke in his address of Cooperation in Medicine. Applying this thought in a more specific manner I would state that this study of our County Medical Society has shown me that when we have failed to accomplish that which we have started to perform as has been frequently the case in our life history, lack of cooperation has been the underlying cause, and

even if we have officers and committees possessing the requisite qualifications for service, a most necessary factor in good work, as was expressed in Dr. Arthur J. Bedell's address when president in 1912, all will not go well with us unless all are working harmoniously toward one purpose, one ideal.

This medical Society should include in its membership all reputable practising physicians residing in this county, not only for what it would mean to this Society but for their own interest as well, for such membership carries with it all privileges and advantages that membership in the Medical Society of the State of New York confers. When we work unitedly much can be accomplished. Our Society has an enviable record, a continuous record of work since its organizations July 29, 1806. No reorganization has been necessary; it has always fearlessly met the problems that confronted it and never shirked the conflict. May our motto always be, in the words of Horace: "*Vestigia nulla retrorsum.*"

ALBANY HOSPITAL

SEVENTEENTH REPORT OF PAVILION F, DEPARTMENT FOR MENTAL DISEASES, FOR THE NINE MONTHS ENDING JUNE 30, 1919.

By J. MONTGOMERY MOSHER, M. D.,

Attending Specialist in Mental Diseases.

To the Board of Governors:

I have the honor to present the seventeenth report of Pavilion F, for the nine months ending June 30, 1919.

There remained in the Pavilion on October 1, 1918, thirty patients—sixteen men and fourteen women. There have been admitted one hundred sixty-five men and one hundred thirty-three women. The whole number of patients under treatment was, therefore, three hundred twenty-eight.

There have been discharged two hundred ninety-eight patients—one hundred sixty-seven men and one hundred thirty-one women, and there remained in the Pavilion at the end of the fiscal year, fourteen men and sixteen women.

The following tables show the forms of disease and the results of treatment for the year, and since the opening of the Pavilion:

TABLE I.—SHOWING THE FORMS OF DISEASE AND THE RESULTS OF TREATMENT FOR THE NINE MONTHS ENDING JUNE 30, 1919.

FORM OF DISEASE	Recov- ered		Im- proved		Unim- proved		Died		Remain- ing		Total		Total
	M	W	M	W	M	W	M	W	M	W	M	W	
Acute delirium.....	4			1		3		3	1		5	7	12
Confusional insanity..	4	2	8	6	6	7			1	1	19	16	35
Melancholia.....	2	3	7	12	2	13	1	1	2	1	14	30	44
Mania.....	2	3	1	1	2	4				2	5	10	15
Primary dementia.....	2		5	5	3	3			2	3	12	11	23
Recurrent insanity.....			2		1	1			1		3	2	5
Chr. delus. insanity.....			1	1	6	2			1		7	4	11
General paralysis.....				1	7	2	1		1		9	3	12
Terminal dementia.....			1	3	8	6	3	1	1	4	13	14	27
Idiocy and Imbecility..				2	4	3	1		2		7	5	12
Alcoholic delirium.....	4		3				1				8		8
Alcoholism.....			36	3	1				2		39	3	42
Drug addiction.....			4	8	1	2	1				6	10	16
Neurasthenia.....				4					1			5	5
Hypochondriasis.....			1						1		1	1	2
Epilepsy.....			2		3						5		5
Hysteria.....		2	1	8		1					1	11	12
Organic brain disease..			1		2		3	1	2		8	1	9
Cerebral concussion.....		1										1	1
Chorea minor.....		1										1	1
Meningitis.....							1				1		1
Tuberculosis.....			2				1				3		3
Pneumonia.....	2						1	3			3	3	6
Organic heart disease..			1								1		1
Aniline poisoning.....	1										1		1
Fracture of skull.....			1								1		1
Nephritis.....				1	2		1		1		3	2	5
Influenza.....			1					3			1	3	4
Attempted suicide.....			1								1		1
No diagnosis.....											4	4	8
Totals.....	21	12	79	56	48	47	15	12	14	16	181	147	328

TABLE II.—SHOWING THE FORMS OF DISEASE AND THE RESULTS OF TREATMENT SINCE THE OPENING OF THE PAVILION, FEBRUARY 18, 1902.

FORM OF DISEASE	Recov- ered		Im- proved		Unim- proved		Died		Remain- ing		Total		Total
	M	W	M	W	M	W	M	W	M	W	M	W	
Acute delirium.....	56	65	25	36	7	28	19	22	1	...	108	151	259
Confusional insanity..	21	18	65	75	65	109	5	6	1	1	157	209	366
Melancholia.....	37	57	81	176	94	182	7	16	2	1	221	432	653
Mania.....	13	24	20	47	54	75	1	...	...	2	88	148	236
Primary dementia.....	11	10	51	39	95	60	1	...	2	3	160	112	272
Recurrent insanity...	1	...	19	28	21	32	...	...	1	...	41	61	102
Chr. delus. insanity...	...	...	5	8	72	72	...	1	...	1	77	82	159
General paralysis.....	...	...	16	2	103	19	6	...	1	...	126	21	147
Terminal dementia.....	...	...	61	51	201	171	49	30	1	4	312	256	568
Idiocy and Imbecility	...	...	26	22	63	59	2	...	2	...	93	81	174
Alcoholic delirium...	33	20	50	8	6	2	47	2	...	...	434	32	466
Alcoholism.....	20	5	514	66	40	10	5	...	2	...	581	81	662
Drug addiction.....	18	13	62	60	12	8	4	5	...	...	96	86	182
Ptomaine poisoning...	2	2	...	...	...	...	...	...	...	...	2	2	4
Nephritis.....	...	...	3	3	4	2	16	4	...	1	23	10	33
Eclampsia.....	...	1	2	1	...	1	...	1	...	...	2	4	6
Epilepsy.....	1	...	37	13	33	16	1	...	...	...	72	29	101
Neurasthenia.....	4	2	28	28	8	15	...	...	...	1	40	46	86
Hysteria.....	4	18	4	57	1	11	...	...	...	...	9	86	95
Chorea minor.....	1	3	1	1	2	1	...	...	...	...	4	5	9
Exophthalmic goitre..	...	...	...	1	...	...	...	...	...	...	...	1	1
Tic douloureux.....	...	...	...	1	...	...	...	...	...	...	...	1	1
Hypochondriasis.....	1	...	20	...	7	...	1	...	1	...	29	1	30
Organic brain disease	...	...	19	12	34	10	26	15	2	...	81	37	118
Cerebral concussion..	9	2	5	...	1	...	...	...	...	...	15	2	17
Oedema of the brain..	...	...	...	...	1	...	1	...	...	...	2	...	2
Locomotor ataxia.....	...	...	3	7	2	...	2	...	...	...	12	7	19
Myelitis.....	...	...	...	1	2	...	2	...	...	...	1	4	5
Arthritis deformans..	...	...	...	...	1	...	...	...	...	...	...	1	1
Meningitis.....	1	...	1	2	...	1	15	3	...	...	17	6	23
Multiple neuritis.....	...	...	1	...	1	...	...	...	...	...	1	1	2
Paralysis agitans.....	...	...	...	...	3	1	3	...	...	...	6	1	7
Hydrophobia.....	...	...	...	...	...	...	1	...	...	...	1	...	1
Tetanus.....	...	...	...	...	...	...	1	...	...	...	1	...	1
Tuberculosis.....	...	...	11	...	5	2	33	5	...	...	49	7	56
Typhoid fever.....	3	1	...	...	...	...	...	...	...	...	3	1	4
Liver disease.....	...	3	...	1	...	...	2	2	...	...	2	6	8
Pneumonia.....	10	...	...	...	...	...	27	6	...	...	37	6	43
Heart disease.....	...	...	5	1	4	...	10	2	...	...	19	3	22
Pernicious anaemia...	...	...	...	1	...	...	1	...	...	...	...	2	2
Chlorosis.....	...	...	...	...	...	...	...	1	...	...	...	1	1
Septicaemia.....	...	...	...	...	...	...	2	1	...	...	2	1	3
Gastro-enteritis.....	...	...	...	...	...	...	1	...	...	...	1	...	1
Fracture of skull.....	...	...	1	1	2	...	5	1	...	...	8	2	10
Multiple fibromatosis	...	...	...	...	...	...	...	1	...	...	...	1	1
Carcinoma.....	...	...	...	...	3	...	...	1	...	...	3	1	4
Strangulated hernia...	...	...	...	...	...	...	1	...	...	...	1	...	1
Pleurisy.....	...	...	1	...	...	...	...	1	...	...	1	1	2
Malingering.....	...	...	...	...	1	...	...	...	...	...	1	...	1
Insolation.....	2	...	...	...	...	...	...	...	...	...	2	...	2
Attempted suicide.....	...	...	1	...	...	...	...	...	...	...	1	...	1
Aniline poisoning.....	1	...	...	...	...	...	...	...	...	...	1	...	1
Influenza.....	...	...	1	...	...	...	3	...	...	...	1	3	4
No diagnosis.....	...	...	...	...	...	...	...	...	...	...	39	26	65
Totals.....	547	244	1141	744	950	893	292	134	14	16	2983	2057	5040

This report includes the period of nine months ending with June 30, 1919, the change having been made to conform with the recent change in the hospital year. The number of admissions has been of the average of the last few years, a slight falling off having been noted in the alcoholics, an indication of improved public morals which may be regarded as permanent. The number of patients received each year since the opening of the pavilion has been as follows:

1902-'03 — 174	1910-'11 — 301
1903-'04 — 157	1911-'12 — 304
1904-'05 — 237	1912-'13 — 319
1905-'06 — 214	1913-'14 — 353
1906-'07 (19 months) — 386	1914-'15 — 378
1907-'08 — 216	1915-'16 — 416
1908-'09 — 197	1916-'17 — 435
1909-'10 — 272	1917-'18 — 379
1918-'19 (9 months) — 298	

This recapitulation reveals that for several years there has been an average of more than one admission a day. The average daily number under treatment for the past nine months has been thirty-two. The number of beds is thirty-three. The highest number of patients at any one time was forty-three and the lowest twenty. The total number of days of treatment was 8,549, making the average duration of residence twenty-six days.

Inasmuch as the patients are practically all emergency cases, an opinion may be formed as to the difficulties imposed upon the hospital and the care and energy needed to meet it. There has been some embarrassment in administration when as many as ten cots have been placed to accommodate the excessive number, but there has resulted a feeling of pride that the hospital is enabled to meet every request made upon it, and no patient has been refused unless he has declined to enter. It is possible to accept patients temporarily, as many remain only a few days or even a few hours, and the fluctuations in census from day to day justify acceptance of the occasional pressure.

The epidemic of influenza is ascribed as the exciting cause in twenty-nine cases. Of these fourteen followed immediately upon the outbreak of the disease in the autumn, ran an acute course, and terminated in a short time. Pulmonary complication proved fatal in several cases, and active delirium necessitated their admission to the hospital. The other cases appeared to be due in part to the debilitating effects of the disease upon the nervous system, and it is probable that for some time to come the origin of mental attacks in individuals otherwise predisposed may be ascribed to influenza. Inquiry in all admissions whose symptoms followed closely the date of the outbreak of the epidemic, has frequently confirmed this supposition.

There have also been several sharp cases of mental excitement among returning soldiers, but the majority of these patients exhibit a mild, though rather intractable nervous exhaustion, of which the more prominent manifestations are inability to concentrate the attention, early fatigue on exertion, and anxiety. As was surmised a year ago this condition may be most appropriately classified with the long understood phrase, traumatic neurosis, and the plan of treatment is sufficiently indicated by the diagnosis. During the latter part of the year provision has been made for these cases upon the general medical wards.

A constant source of anxiety to the administration, producing the greatest tension of its operations, is the possibility of suicide. Twenty-nine patients attempted suicide before admission, and fourteen threatened the act, making a total of forty-three so-called suicidal cases. The preferred method was poisoning which was attempted in fourteen instances, the favorite poisons being corrosive sublimate and iodine; denatured alcohol, chloroform, illuminating gas and rat poison were also used. One patient jumped from a window, four attempted hanging and one drowning. This is a formidable catalogue of the resources of human perversity, and as it is contemplated in recapitulation, the wonder is that none of these attempts proved successful. Great persistence is often manifested on the part of the patients, and considerable ingenuity on the part of the hospital is necessary in order to avoid a calamity of this kind without the evidence of

unpleasant restrictions. Suggestion by negation is fully as harmful as open discussion.

The anatomy of suicide has long afforded a problem for the psychologist. Statisticians, as a rule, ignore the pathological element, and seek explanation in social and economic conditions. Thus it has been affirmed that Germany has been most prolific in suicides, and among the Germans the incidence is greatest in the army. The reason is given that the severe discipline of the nation, the suppression of personal independence and initiative afford the basis for discontent and discouragement which find their sternest ally in the rigor of military discipline. Yet the fact remains that in the mind of the laity suicide is a definite demonstration of insanity. This cannot be true unless one accepts any emotional state as evidence of disease. It is not difficult to believe that conditions of life may be such as to justify or excuse any means of escape. Indeed, the marvel is that such suffering, misery and wretchedness as are observed, do not lead more frequently to self-murder. In a higher type of mind death is preferred to disgrace. And it is conceivable that a highly developed ethical sense may be mortally wounded by an error of judgment. Such is the theme of Hugo's immortal epic of the perennial struggle between inspired virtue and worldly justice. The life-long contention between Jean Valjean, the reformed convict, and Javert, the inspector of police, brings into strong relief the passive submission of the hero and the fundamental faith of the magistrate in the word of the law. Upon the latter there gradually dawns a question of the validity of his belief. In contemplative silence he regards the final convincing demonstration of his victim's moral courage, and in the supreme moment of final victory he lets his prisoner go.

"Until that day, Javert had taken, of the two attitudes of Napoleon, only that which expresses resolution, the arms folded upon the breast; that which expresses uncertainty, the hands behind the back, was unknown to him. Now a change had taken place; his whole person, slow and gloomy, bore the impress of anxiety. * * * * A beneficent malefactor, a compassionate convict, kind, helpful, clement, returning good for evil, returning pardon for hatred, loving pity rather than vengeance, preferring to destroy himself rather than to destroy his enemy, serving him who had stricken him, kneeling upon the height of virtue, nearer the angels than

men. * * * * * He said to himself that it was true then, that there were exceptions, that authority might be put out of countenance, that rule might stop short before a fact, that everything was not framed in the text of the code, that the unforeseen would be obeyed, that the virtue of a convict might spread a snare for the virtue of a functionary, that the monstrous might be divine, that destiny had such ambuscades as these, and he thought with despair that even he had not been proof against a surprise. * * * * * To be obliged to acknowledge this: infallibility is not infallible, there may be an error in dogma, all is not said when a code has spoken, society is not perfect, authority is complicate with vacillation, a cracking is possible in the immutable, judges are men, the law may be deceived, the tribunals may be mistaken! to see a flaw in the immense blue crystal of the firmanent!"

His philosophy of life thus exploded, as if by a thunderbolt, he passed to a guard-house, left "Some Observations for the Benefit of the Service," returned to the parapet, and plunged into the Seine.

Cato's destruction of himself was due to his anticipation of the slavery of his country under the domination of Caesar. Addison puts these words in the mouth of the dying hero:

"I am sick to death; oh, when shall I get loose
From this vainworld, the abode of guilt and sorrow?
And yet methinks a beam of light breaks in
On my departing soul. Alas, I fear
I have been too hasty! O ye powers that search
The heart of man, and weigh his inmost thoughts,
If I have done amiss, impute it not:
The best may err, but you are good, and —"

(*dies.*)

But suicide is not always a voluntary act, the result of mature reflection. It is a symptom of disease, and there are certain conditions in which it may be anticipated with a reasonable certainty. It is to be regarded as a manifestation of melancholia just as a febrile elevation of temperature attends an infection. The province of the hospital is to meet this morbid demonstration so far as is humanly possible. But, just as infection passes beyond control in an occasional case, so do these impulses, and there is the satisfaction at the end of the year in the record of prevention, which, it must be acknowledged, seems occasionally to be attained as the result of good fortune.

DISCHARGES.

Of the two hundred ninety-eight patients discharged, thirty-three recovered and one hundred thirty-five were improved. The percentage of cases distinctly benefited was fifty-six. Since the opening of the Pavilion the percentage of cases discharged as recovered and improved has been fifty-four. Ninety-five patients were discharged unimproved, and twenty-seven died. The causes of death were: exhaustion of alcoholism, one; pneumonia, eight; organic brain disease, six; nephritis, one; meningitis, one; heart disease, one; general paralysis, one; exhaustion, two; influenza, three; tuberculosis, one; debility of old age, one; locomotor ataxia, one.

Of the five thousand forty patients admitted in seventeen years, twenty-six hundred seventy-six have returned to their homes with health restored.

ACKNOWLEDGMENT.

It is a pleasure, each year, to make public acknowledgment of the courtesy and cooperation of the City Department of Charities. Cordial relations have been maintained since the opening of the Pavilion in 1902, and the importance of this mutual understanding cannot be over-estimated. By a special statute the Commissioner of Charities possesses the magisterial power of commitment for a few days of alleged cases of mental disease for observation and determination. In a large city like Albany there arise many instances of misbehavior for which the analysis afforded by this plan is necessary. It undoubtedly prevents many unjust detentions in custodial places, and relieves many temporarily distressing situations. To Commissioner Quentel and his associates the hospital owes an increasing debt of gratitude.

It may not be improper to add an expression of approval of the work of the nurses. Their activities on the ward are manifestly in the line of routine duty, and they receive in the way of education and training a greater benefit than they give. But the service is not always pleasant and is often attended by anxious responsibility. There is yet to be recorded any concrete instance of neglect of duty, and the willingness and sympathy always

apparent not only add much to the effectiveness of what might prove a dull routine, but inspire confidence in patients and thus contribute to their well-being and even to recovery. Two years ago, Miss Alice Klute, who had carried the ward upon her shoulders for twelve years with a loyal spirit which threatened health, resigned to engage in duty with the Red Cross. Miss Margaret Flanagan was appointed to the vacancy, and has maintained the wards upon the highest plan of efficiency.

The improvements described as well under way in the report for 1918, have been completed. The Board of Supervisors of the County of Albany, after personal inspection, responded without question, to the apparent need of repairs, and this undertaking of some magnitude was finished in the autumn. The new bath rooms have been serviceable and have added much to the preservation of sanitary conditions. The connecting corridor with the main building, which was developed into a solarium, has been furnished with reclining chairs, a couch, and other allurements for repose and quiet, and has amply justified the expectations of its sedative and consolatory possibilities. There has been placed in it the "Anna S. Lawler Memorial Library." Mrs. Lawler died in the winter, and her husband, Mr. Thomas C. Lawler, presented her collection of books, in number about four hundred, for the diversion of the patients of this department of the hospital. The selection of literature is a good one, and varied to meet many tastes. In addition to this eight volumes of standard fiction have been received from Mrs. Norah Mack, seven volumes of mystery tales from Mr. and Mrs. P. K. Dederick, Jr., three illustrated reports on Adirondack surveys from Mr. Verplanck Colvin, and novels and packages of magazines from Mr. Thomas C. Lawler. To Mr. Lawler we are also indebted for two framed pictures. The attractiveness of the halls and rooms has been enhanced by the hanging of seven pictures from the estate of the late Mrs. Catherine Gansevoort Lansing, some of these highly prized paintings in oil.

For Christmas day Miss Ethel Van Benthuyzen prepared a tree with decorations, and electric illumination was provided through the kindness of Mrs. John Huyck. Cigarettes and candies were distributed by Mr. C. Van Merrick and one potted

plant has been received from Mr. John Engett. Subscription to *McClure's Magazine* has had the usual renewal by a friend and former patient.

This acknowledgment of the kindness and thoughtfulness of many friends is made with a deep sense of gratitude. These apparently unnecessary agents of treatment are not always regarded at their true value. Assurance may be given that the incidental evidences of comfort go far toward relieving apprehension and suspicion on the part of patients, whose distorted imaginations, accentuated by unwise solicitation, may be relieved by the attractive and home-like appearance of a ward where they may have anticipated harshness. In like manner the liberal appropriation by your Board for carpets has relieved a clatter which had become distracting. The physical condition of the building is now satisfactory, and through the thoughtfulness of the Governors and of other friends has reached a state of which no just complaint can be made.

In this connection a word may be said in tribute to your late President, Mr. J. Townsend Lansing. His sudden death occurred shortly after the close of the hospital year and while this report was in preparation. As you well know he assumed the obligations of his office without reservation as to their extent, and responded to every demand upon his time and upon his counsel. There came naturally to him many questions for solution as to the policy of the department for mental diseases. These included matters of internal administration and of relations with public authorities and the community at large. It is worthy of note that at the beginning and throughout he required that the interests of nurses and employes should be regarded with the same care as those of patients. He manifested a fine sense of justice and equity. Beyond this no appeal in behalf of a patient was made in vain. He visited the wards and studied their needs. No report of this kind would be complete without expression of the sense of personal affection he had inspired in officers and employes of the hospital. The loss is a great one and his unfailing evenness of temper, his anxiety to relieve distress, his sympathy and humanity will remain as a blessed memory and an inspiration.

Editorial

It will be said that the powers of those medicines, which are found most effectual in the cure of diseases, were not discovered by men of uncommon sense and penetration, but some by mere accident, others by ignorant savages and others we owe to the chymical enthusiasm of a credulous age, which hot in the pursuit of the philosopher's stone, stumbled on discoveries in medicine, and other arts, far more beneficial to mankind than the object they pursued even had they obtained it; but that few discoveries of this nature were made by men of science in consequence of study and reflection.

There is no denying this assertion, and the reason is plain:—When the most profound sagacity is exerted on subjects beyond its reach it is on a level with the grossest stupidity: All the sense and learning in the world cannot *a priori* find out the qualities of any simple or mineral whatever. If the roots of rhubarb and ipecacuanha were produced to an assembly of physicians or chymists, who had never seen or heard of them before they never could by any reasoning, examination or process whatever, discover that the one is possessed of a purgative and the other of an emetic quality; or if they were told that each was endowed with one of those qualities, all their skill would be baffled in attempting to ascertain which was the emetic, and which the purgative.

Medical Sketches, 1786.

JOHN MOORE.

+ + +

Changes and Progress in Medical Education. The standards for medical education have been rapidly elevated since 1905. At this time the Council on Education of the American Medical Association proposed certain standards which were fully satisfied by all the best schools of the country by the year 1915. With this general raising of standards various states passed laws concerning the right to practice; this also had an important influence upon the elevation of medical requirements. In 1913 New York State required, by law, one pre-medical year in addition to the high school course before granting

a medical student's qualifying certificate and in 1917 the public health law, chapter 45, of the consolidated laws to provide for the preliminary education of medical students stated that "the degree of bachelor or doctor of medicine shall not be conferred in this state before the candidate has filed with the institution conferring it the certificate of the Regents that before beginning the first annual medical course counted toward the degree, he had earned a medical student qualifying certificate in accordance with the rules of the Regents. The minimum requirement, for matriculates after January 1, 1917, in determining a candidate's qualification for matriculation in a medical school or for admission to the medical licensing examinations, the Regents will accept evidence of the successful completion of *two* years of college work in an approved college of liberal arts and science after the successful completion of four years work in an approved secondary school."

In addition to the two years in college the student must spend four years in medical college and many states now require, for admission to the practice of medicine, a year's internship in an approved hospital. Thus seven years after graduation from the high school are required before a man is entitled by law to practice medicine in many states and it is very probable that this fifth, or hospital, year will shortly be adopted in New York State. Because of these greatly increased requirements the number of medical students has diminished in the United States from 28,142 in 1904 to 13,052 in 1919, and the number of medical schools in the corresponding time has diminished from 160 to 85.

In considering these figures it must be borne in mind that although the reduction is great in the number of medical students and the number of schools, the effect has been greatly to improve the value to the community of the medical service by the graduates in more recent years.

The cost of medical education at the present time is very great. The student's fees cover, at any of the good schools, not more than from one-half to one-fifth the actual cost of instruction. The expense involved in securing a medical education is considered by some to be the reason that it is difficult to induce young men to settle in practice in small towns. Others

believe that the conditions for practice are due to the dissatisfaction the young men feel in not having suitable laboratories, hospitals and instruments for the type of work to which they are accustomed by their medical training, and which they might secure if they settle in larger centers.

There is no doubt that these are contributing causes but the chief reason for the lack of medical men in such small villages is purely economic. A survey of the villages which are now without medical service shows in many instances that the population in these localities has greatly diminished because of local changes in the population due to a change in markets, scarcity of farm labor, removal or suspension of industrial enterprises, or other similar conditions. The scarcity of medical attendants in these small outlying towns is a matter for serious concern but it should not be met by sending out poorly trained and otherwise unqualified doctors. In the summer the automobile allows the physician to take care of these distant villages satisfactorily. This is particularly true if he has the assistance of a well trained public health nurse who is resident in the community. At this time of year also older physicians who still wish to do a little practice may lead a pleasant and useful life by doing medical work in communities needing such service.

In the winter, however, when there is apt to be even more sickness and the weather conditions are not favorable to travel by automobile, the problem of adequate medical service for the small outlying village is a real one which has not yet been met. The properly trained public health nurse and salaried health physician may help to solve this problem. There is so little distinction between the very poorly trained doctor, the chiropractor and the osteopath, that surely the former will help but little to correct the faults and defects of the latter. It also seems possible that with the proper development of group practice arrangements will be made to extend adequate medical service perhaps by rotation of residence in order to allow contact with other members of the group.

It is probable, furthermore, that the present scarcity of doctors occasioned by the greatly increased standards of medical education, by the war, and because of the recent influenza epi-

demic, has already reached the lowest point. This year the classes at most of the medical schools in this state are filled and the premedical years in the colleges also have an unusually large attendance.

Of the 184 applications for admission to the Albany Medical College for the session 1919-1920, 103 men were rejected, 24 because of limitations in numbers of students admitted to each class, particularly in the last two or clinical years. This limitation is owing to the lack of clinical material which can be utilized at the present time under suitable laboratory and nursing aids. Limitation also is important in order to maintain that intimate personal relation between the students and teachers which is the very essence of successful teaching and should be particularly emphasized in the teaching of medicine.

Eight men were rejected because they had not had organic chemistry, which can be taught as well in the college or scientific school as in the medical school, and also owing to the great development of physiological chemistry there is barely sufficient time in the medical school for this branch of chemistry. Therefore, organic chemistry is required before admission to the Albany Medical College. This allows more time to be given to the rapidly growing and vitally important branch of medical chemistry.

Forty-one men were rejected because of conditions. A rule has been made that no men conditioned in other medical schools should be given make-up examinations by the Albany Medical School and admitted to classes higher than the class to which they would be re-admitted in the school which they had previously attended. This rule is made so that conditioned students will not go from school to school in search of lower standards. Few schools can carry the burden of taking conditioned students and allowing them to pass on to succeeding classes. With few exceptions such students tend to hold back the others and to lower the standards of instruction,

Thirty men were rejected because their qualifications did not meet the present State requirements which were quoted above. Notwithstanding these rejections and the greatly elevated standards for admission to the medical school the number of students

in the first year class of the Albany Medical School has more than doubled since last year and the premedical classes at Union College have enrolled forty-two students in the first year and thirty-seven students in the second year.

It will be seen that the scarcity of medical men at the present time is apparently only temporary and the demand for well trained men is, and will be rapidly met. There are also great changes occurring and about to occur in medical practice which are quite certain to be factors in determining the nature of medical education. Reference has been made to the so-called group medicine, which may also be applied to public health and industrial medicine as well as to practice. Such development cannot be ignored in the training of medical students of the future. The proper development and organization and coordination of the activities of such groups of medical men would appear to be the most satisfactory way of correcting certain obvious defects in medical practice.

Public Health

Edited by Arthur Sautter, M. D.

DEPARTMENT OF PUBLIC SAFETY, BUREAU OF HEALTH, ALBANY, N. Y.

COMPILED BY WILLIAM F. FULLGRAFF, REGISTRAR.

BUREAU OF VITAL STATISTICS.

DEATHS FOR THE MONTH OF SEPTEMBER, 1919.

Consumption	11	Bright's Disease	8
Typhoid Fever	0	Apoplexy	9
Scarlet Fever	0	Cancer	8
Whooping cough	0	Accidents and Violence.....	9
Measles	0	Deaths under 1 year.....	16
Diarrheal Diseases	6	Deaths over 70 years.....	21
Pneumonia	4	Death rate	11.85
Broncho Pneumonia	3	Death rate less non-residents	9.63

Deaths in Institutions.

	Non-Res.	Res.		Non-Res.	Res.
Albany Hospital	6	7	Maternity Hospital	2	4
Albany Hospital Camp..	1	3	Public Places	0	1
Albany Orphan Asylum.	0	1	St. Margaret's House...	3	1
Albany Penitentiary	1	0	St. Peter's Hospital	2	8
Child's Hospital	0	1			
County Hospital	1	0		19	37
Homeopathic Hospital ..	2	8			
Hospital for Incurables.	0	2	Births		168
Home for the Aged.....	1	1	Still Births		7

DIVISION OF COMMUNICABLE DISEASES.

Typhoid Fever	13	Mumps	7
Scarlet Fever	5	Pneumonia	8
Diphtheria and Croup	4	Influenza	17
Chickenpox	4	Septic Sore Throat.....	7
Smallpox	0	Acute Anterior Poliomyelitis	1
Measles	1	Ophthalmia Neonatorum ...	1
German Measles	0		
Whooping-cough	9	Total	96
Tuberculosis	19		

Number of days quarantine for scarlet fever:

Longest..... 31 Shortest..... 30 Average..... 30½

Number of days quarantine for diphtheria:

Longest..... 25 Shortest..... 14 Average..... 19½

Fumigations:

Rooms..... 85 Buildings..... 19

Milk bottles disinfected 79

Communicable Diseases in Relation to Schools.

		Reported D. S.F. M.
Public School No. 3.....	3	1
Public School No. 15.....		1
St. Joseph's Academy		2

MISCELLANEOUS.

Cards posted for communi- cable disease	9	Inspections and reinspections	29
Cards removed	5	Vaccinations	206
Notices served on schools..	31	Vaccination dressings	382
Notices served on stores and factories	5	Children examined for em- ployment certificates	36
Postal card returns sent to doctors	9	Number of employment cer- tificates issued	35
Postal card returns received from doctors	5	Taking specimens of blood for Wassermanns	7
		Taking smears for Gonococci	6

Tuberculosis.

Living cases on record October 1, 1919.....		893
Cases reported:		
By card	17	
Dead cases by certificate.....	2	19
		912
Dead cases previously reported.....	9	
Dead cases not previously reported.....	2	
Removed	3	
Died out of town.....	0	
Recovered	0	
Unaccounted for	0	14
Living cases on record October 1, 1919.....		898
Total tuberculosis death certificate.....		11
Non-resident deaths:		
Albany Hospital Camp	2	
C. F. L. Pavilion.....	0	
County Hospital	1	
St. Margaret's House	0	
City at large	1	4
Resident deaths		7
Visits to cases of tuberculosis.....		25
Miscellaneous visits		34

LABORATORY REPORT.

Diphtheria.

Initial Positive	10	Unsatisfactory	3
Initial Negative ..	212		
Release Positive	14	Total	268
Release Negative	29		

Sputum for Tuberculosis.

Positive	16	Unsatisfactory	1
Negative	104		
		Total	121

Widals.

Positive	8	Unsatisfactory	7
Negative	29		
		Total	44

Meningococcus.

Positive	0	Negative	0
Total			0
Wassermann tests	268	Gonorrhea Examinations ..	69
Milk Analyses	182	Miscellaneous Examinations.	0
Water Analyses	0		
Pathological Examinations .	3	Total Examinations	955

HEALTH PHYSICIAN'S REPORT.

Cases assigned	24	Calls made	62
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DIVISION OF SANITATION.

Inspections	55	Reinspections	82
Plumbing	18	Plumbing	14
Sanitary	37	Sanitary	68

HEARINGS.

Hearings	4	Cases heard	6
Filthy premises	5	Manure	1
Reinspection	6	Abated	0

DIVISION OF PLUMBING, DRAINAGE AND VENTILATION.

Inspections	106	Smoke	0
Old Houses	73	Blue or red	0
New Houses	33	Peppermint	4
Permits issued	67	Water test	16
Plumbing	56	Houses examined	21
Building	11	Re-examined	56
Plans submitted	6	Valid	9
Old buildings	5	Without cause	12
New buildings	1	Violations	0
Houses tested	20		

REPORT OF REMOVAL OF DEAD ANIMALS.

Horses removed	7	Cats removed	53
Dogs removed	30		
Total			90

DIVISION OF MARKETS AND MILK.

Public market inspections...	14	Milk cans inspected.....	536
Market inspections	75	Milk cans condemned.....	0
Fish market inspections	6	Lactometer readings	89
Fish peddler inspections	0	Temperature readings	89
Slaughter house inspections ..	0	Fat tests	0
Rendering establishment in-		Sediment tests	34
spection.....	0	Chemical tests	0
Pork packing house inspec-		Cows examined	542
tions	0	Cows quarantined	3
Hide house inspections	0	Cows removed	0
Milk depots inspected	17	Complaints investigated	3
Stores inspected	44	Milk houses inspected	55
Dairies inspected	55	Cows rejected	7

Medical News

THE MEDICAL SOCIETY OF THE COUNTY OF SCHENECTADY has issued the following statement:

IS COMPULSORY HEALTH INSURANCE INEVITABLE?—This is the first question that the Committee on Public Information of the Medical Society of the County of Schenectady had before it when we undertook the investigation of the subject of Compulsory Health Insurance.

We had heard for several years the often-repeated statement that Compulsory Health Insurance was inevitable and that the medical profession had better make the best of it. When we came to study the actual data at hand we found several very interesting facts which are briefly as follows:

Ninety per cent of the "inevitability" talk can be traced directly to Mr. Andrews and a few other propagandists for Compulsory Health Insurance. It is part of the propaganda.

Only an overwhelming popular demand will make inevitable a law which will reverse the very history of the State and substitute for a policy of individual liberty and self help a policy of control of the individual and State help. There is in this State almost no popular demand for any such change.

The only persons who are alleged to benefit from this distinct class legislation are the laboring people. It is well known that the farmers, the merchants, the manufacturers and the common people are against Compulsory Health Insurance. Even labor is not in favor of Compulsory Health Insurance.

In California last fall the whole stage was set in favor of Compulsory Health Insurance. The legislature had passed a constitutional amendment in favor of it. Hiram Johnson was in favor of it. The so-called commission to investigate the subject, composed chiefly of American

Association for Labor Legislation propagandists, had reported in favor of Compulsory Health Insurance. The professional labor leaders were for it. There was an intense education campaign extending over the entire State. *When the question came to a state-wide popular vote Compulsory Health Insurance was defeated by a vote of nearly 3-1 and labor did not support the measure.*

In Utica last spring there was a campaign of education on the subject followed by a popular vote on the subject. Thirteen thousand factory employees voted on the subject. Did they vote for it, or 2-1 against it, or even 10-1 against it? *No, they voted 12,875 to 112, or 100-1 against Compulsory Health Insurance.*

Any law which is fundamentally unjust; which demands that industry pay fifty per cent of the costs when industry is responsible for less than one per cent; which teaches the doctrine that it is unhealthy to work; and which substitutes a policy of control of the individual and forced charity for the policy which has made this country what it is—such a law is not in our opinion inevitable.—*Committee on Public Information, Medical Society of the County of Schenectady.*

PERSONAL.—Dr. WARDNER D. AYER (A. M. C., '10), of Syracuse has retired from practice with Drs. Heffron and Alsever, and has opened an office for the practice of internal medicine, with special attention to neurology at 320 Physicians Building, Syracuse, N. Y.

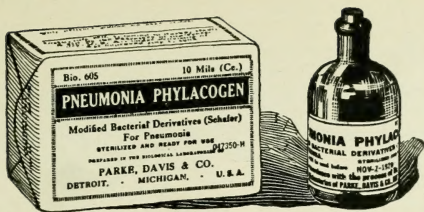
—Dr. HENRY M. GROGAN (A. M. C., '10), announces the opening of his office at 84 Willett street, Albany, N. Y., for practice, limited to diseases of the ear, nose and throat.

—Dr. E. MARTIN FREUND (A. M. C., '16) has returned from overseas, and has resumed practice at 154 Lark street, Albany, N. Y.

In Memoriam

JOHN F. BEIERMEISTER, M. D.

Dr. JOHN F. BEIERMEISTER, a graduate of the Albany Medical College of the class of 1910, a member of the Phi Sigma Kappa fraternity, died October 24, 1919, at his home in Rochester during an attack of angina pectoris. Dr. Beiermeister was born in Troy and received his early education in that city. After his graduation in medicine he passed a year at the Lying-in Hospital in New York. He then went to Rochester where for sixteen months he was an interne in the General Hospital and eight years ago began private practice in that city. He leaves his wife, Marian F. Beiermeister, a daughter, Lorna Jean Beiermeister, both of Rochester; his parents, Mr. and Mrs. J. M. Beiermeister, and a sister, Edna Beiermeister of Troy. He was a member of the Rochester Pathological Society, the Rochester Medical Club, and the State and County Medical Societies.



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Technique

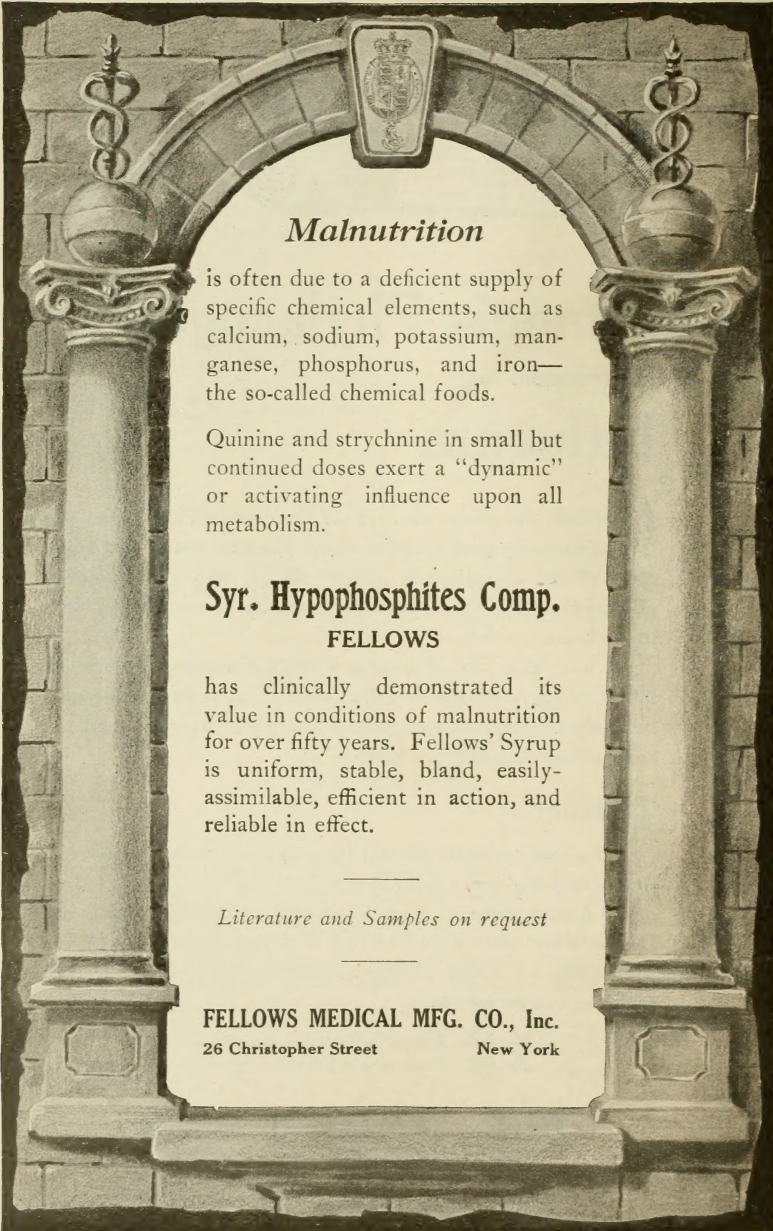
Administer at once one mil (Cc.) of Pneumonia Phylacogen, the second day give two mils, the third day three mils, and so on, as a preventive of pneumonia and to check the influenza. Do not allow more than 24 hours to elapse between doses. In some cases the interval should be shortened to 12 hours, or even to 8 hours in severe cases.

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The academic year begins Sept. 22, 1919. All inquiries and other communications should be addressed to Thomas Ordway, M.D., Dean, Albany Medical College, Albany, N. Y.